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| Chapter you are filing under: | |
|-------------------------------|---------------------------------------|
| ☐ Chapter 7 | |
| ☐ Chapter 11 | |
| ☐ Chapter 12 | |
| Chapter 13 | ☐ Check if this an amended filing |
| | ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: | Identify Yourself | | |
|-----|--------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | Writ | e the name that is on | Michael | Michaela |
| | | government-issued ure identification (for | First name | First name |
| | exar | mple, your driver's | E | J |
| | licer | nse or passport). | Middle name | Middle name |
| | | g your picture tification to your | Egert | Egert |
| | | eting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | use Inclu | other names you have d in the last 8 years ude your married or den names. | | Michaela Jo Egert |
| 3. | you num Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number | xxx-xx-8896 | xxx-xx-1753 |

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Debtor 1 Michael E Egert
Debtor 2 Michaela J Egert

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ■ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 22W732 Hackberry Dr | If Debtor 2 lives at a different address: | | | |
| | | Glen Ellyn, IL 60137 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | DuPage | , | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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| | otor 1 otor 2 | Michael E Egert Michaela J Egert | | | Document | raye 3 | _ | number (if known) | |
|-----|------------------|--|-----------|--|---|-------------|---------------------|---------------------------|---|
| Det | 7.O1 Z | Michaela 3 Egert | | | | _ | Case | | |
| Par | t 2: | Tell the Court About | Your Ban | kruptcy Ca | se | | | | |
| 7. | Bank | chapter of the truptcy Code you are | | | rief description of each, see go to the top of page 1 and | | | .C. § 342(b) for Individ | uals Filing for Bankruptcy |
| | choo | hoosing to file under | ☐ Chap | oter 7 | | | | | |
| | | | ☐ Chap | oter 11 | | | | | |
| | | | ☐ Chap | oter 12 | | | | | |
| | | | ■ Chap | oter 13 | | | | | |
| 8. | How | you will pay the fee | ■ Iv | vill pay the | entire fee when I file my p | etition. Pl | ease check with t | the clerk's office in you | ir local court for more details |
| | | | or | | attorney is submitting your p | | | | n, cashier's check, or money h a credit card or check with |
| | | | | | the fee in installments. If ye in Installments (Official Fo | | e this option, sigr | and attach the Applic | ation for Individuals to Pay |
| | | | bu tha | I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition. | | | | | |
| | | | | | | | | | |
| 9. | | you filed for ruptcy within the | □ No. | | | | | | |
| | | years? | Yes. | | | | | | |
| | | | | District | Northern Dist of Illinois | When | 10/15/15 | Case number | 15-35104 |
| | | | | District | | When | | Case number | |
| | | | | District | | When | | Case number | |
| 10. | case | nny bankruptcy s pending or being | ■ No | | | | | | |
| | not f you, | by a spouse who is iling this case with or by a business er, or by an ate? | ☐ Yes. | | | | | | |
| | | | | Debtor | | | | Relationship to y | ou |
| | | | | District | | When | | Case number, if | |
| | | | | Debtor | | | | Relationship to y | |
| | | | | District | | When | | Case number, if | known |
| 11. | | ou rent your lence? | ■ No. | Go to li | ne 12. | | | | |
| | 16210 | iciloc (| ☐ Yes. | Has yo | ur landlord obtained an evict | ion judgm | ent against you a | nd do you want to stay | in your residence? |
| | | | | | No. Go to line 12. | | | | |
| | | | | | Yes. Fill out <i>Initial Statemer</i> bankruptcy petition. | nt About ai | n Eviction Judgme | ent Against You (Form | 101A) and file it with this |
| | | | | | | | | | |

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| Deb | tor 2 Michaela J Egert | | | | Case number (if known) | | |
|--|---|--------------------------------------|--|--------------------------------------|---|-----|--|
| | | | | | | | |
| Par | Report About Any Bu | sinesses | You Own | as a Sole Proprie | tor | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | ■ No. Go to Part 4. | | | | |
| | | ☐ Yes. Name and location of business | | | | | |
| | A sole proprietorship is a | | | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | oer, Street, City, Sta | tte & ZIP Code | | |
| | it to this petition. | | Chec | k the appropriate bo | ox to describe your business: | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | I Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as d | defined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | e | | |
| Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your operations, cash-flow statement, and federal income tax return or if any of these documents at the small business in 11 U.S.C. 1116(1)(B). | | | court must know whether you are a small business debtor so that it can set appropria a small business debtor, you must attach your most recent balance sheet, statement federal income tax return or if any of these documents do not exist, follow the procedular | of | | | |
| | debtor? For a definition of small | ■ No. | I am r | not filing under Chap | pter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | 11, but I am NOT a small business debtor according to the definition in the Bankrupto | у | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Cod | de. | |
| Par | t 4: Report if You Own or | Have Any | / Hazardo | ous Property or An | y Property That Needs Immediate Attention | | |
| 14. | Do you own or have any property that poses or is | ■ No. | | | | | |
| | alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | | | |
| | | | | | Number, Street, City, State & Zip Code | | |
| | | | | | | | |

Debtor 1

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| Debtor 1 | Michael E Egert | |
|----------|------------------|------------------------|
| Debtor 2 | Michaela J Egert | Case number (if known) |

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| | michaela J Egert Michaela J Egert | | | | Case nu | ımber (if known) | | |
|--|---|---|--|--|--------------------------------|---|---|--|
| Par | Answer These Questi | ions for Re | porting Purposes | | | | | |
| 16. | What kind of debts do you have? | | Are your debts primarily coindividual primarily for a pers | | | defined in 11 U.S.C. § | 101(8) as "incurred by an | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | ■ Yes. Go to line 17. | | | | | |
| | | | Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you o | owe that are not consu | mer debts or bu | siness debts | | |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing under Chapter | 7. Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | | I am filing under Chapter 7. E expenses are paid that funds | | | | nd administrative | |
| | administrative expenses | | □ No | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | □ Yes | | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-19 □ 200-99 | | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,0 |) | ☐ 25,001-50 ☐ 50,001-10 ☐ More than | 00,000 | |
| 19. | How much do you estimate your assets to be worth? | \$100,0 | 50,000 11 - \$100,000 101 - \$500,000 101 - \$1 million | □ \$1,000,001 □ \$10,000,000 □ \$50,000,000 □ \$100,000,000 | 1 - \$50 million | □ \$1,000,00 □ \$10,000,0 | 0,001 - \$1 billion 00,001 - \$10 billion 000,001 - \$50 billion n \$50 billion | |
| 20. | How much do you estimate your liabilities to be? | \$100,0 | 50,000 01 - \$100,000 101 - \$500,000 101 - \$1 million | | | □ \$1,000,0 □ \$10,000, | 0,001 - \$1 billion 00,001 - \$10 billion 000,001 - \$50 billion un \$50 billion | |
| Par | t 7: Sign Below | | | | | | | |
| For | you | I have exa | amined this petition, and I dec | clare under penalty of | perjury that the i | information provided is | true and correct. | |
| | | | hosen to file under Chapter 7 ates Code. I understand the r | | | | | |
| If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | elp me fill out this | | | | |
| | | I request i | relief in accordance with the o | chapter of title 11, Unit | ted States Code | , specified in this petition | on. | |
| | | | and making a false statement, by case can result in fines up to 1 3571. | | | | | |
| | | /s/ Micha | ael E Egert | | /s/ Michaela | | | |
| | | Michael Signature | of Debtor 1 | | Michaela J E Signature of D | | | |
| | | Executed | on <u>August 31, 2017</u> MM / DD / YYYY | | Executed on | August 31, 2017 MM / DD / YYYY | | |

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| 5 1 | Mishael E Essat | Document | Page 7 of 66 | |
|----------------------|--|---|----------------------------------|--|
| Debtor 1 Debtor 2 | Michael E Egert Michaela J Egert | | Cas | e number (if known) |
| | | | | |
| • | attorney, if you are ted by one | • | ited States Code, and have e | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § |
| • | not represented by ey, you do not need s page. | |) applies, certify that I have r | no knowledge after an inquiry that the information |
| | | /s/ David Cutler | Date | August 31, 2017 |
| | | Signature of Attorney for Debtor | | MM / DD / YYYY |
| | | David Cutler | | |
| | | Printed name | | |
| | | Cutler & Associates, Ltd | | |
| | | Firm name | | |
| | | 4131 Main Street | | |
| | | Skokie, IL 60076 | | |
| | | Number, Street, City, State & ZIP Code | | |
| | | Contact phone 847-673-8600 | Email address | david@cutlerltd.com |

Bar number & State

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| | | Docume | nt Page 8 of 66 | |
|---|-------------------------|---------------------|-----------------|---|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Michael E Egert | | | |
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 | Michaela J Egert | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT (| OF ILLINOIS | |
| Case number | | | | |

Official Form 106Sum

(if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 260,000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 25,100.00 1c. Copy line 63, Total of all property on Schedule A/B..... 285,100.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 225.782.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 123.872.00 Your total liabilities 349,654.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 5,626.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 4,423.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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|----------|------------------|----------|------------------------|--|
| | Michael E Egert | | 9 | |
| Debtor 2 | Michaela J Egert | | Case number (if known) | |

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tot | al claim |
|--|-----|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 70,455.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 70,455.00 |

| C | Case 17-26170 | Doc 1 | | 08/31/17 ument | Entered (| | 7 10:29:3 | 37 De | sc N | Main |
|---------------------------|---|--------------------|---------|-------------------|------------------------|----------|------------------------------|--------------|--------|-------------------------------------|
| Fill in this info | ormation to identify yo | our case and t | | | | | | | | |
| Debtor 1 | Michael E Ege | rt | | | | | | | | |
| | First Name | | e Name | | Last Name | | | | | |
| Debtor 2 | Michaela J Ego | | - N | | LastName | | | | | |
| (Spouse, if filing) | First Name | | e Name | | Last Name | | | | | |
| United States | Bankruptcy Court for th | e: NORTHER | RN DIST | RICT OF ILLIN | IOIS | | | | | |
| Case number | | | | | | | | | | Check if this is an amended filing |
| Schedu n each category | orm 106A/B ILE A/B: Pro , separately list and descess complete and accurate | ribe items. List a | | | | | | | | |
| 1. Do you own o | | | | | | | | | | |
| ■ Yes. When | e is the property? | | | | | | | | | |
| 1.1 | | | What | is the property | P Check all that apply | | | | | |
| | Hackberry Dr | | Wilde | Single-family h | | | Б | | | 5.4 |
| | ss, if available, or other descrip | otion | . = | Duplex or multi | | | | | | r exemptions. Put the n Schedule D: |
| | | | | Condominium | · · | | Creditors Wh | o Have Clain | ns Sed | cured by Property. |
| | | | | | | | | | | |
| | | | | Manufactured of | or mobile home | | Current value | e of the | Cui | rrent value of the |
| Glen Ell | yn IL 6 | 0137-0000 | | Land | | | entire proper | | | tion you own? |
| City | State | ZIP Code | | Investment pro | perty | | \$260 | ,000.00 | | \$260,000.00 |
| | | | | Timeshare | | | | | | wnership interest |
| | | | _ | Other | n the property? C | hock one | (such as fee a life estate), | | ancy b | by the entireties, or |
| | | | _ | Debtor 1 only | in the property? C | HECK OHE | 30.0.0); | , | | |
| DuPage | • | | | Debtor 2 only | | | | | | |

property identification number:
Single Family Home - 22W732 Hackberry Dr, Gle

Single Family Home - 22W732 Hackberry Dr, Glen Ellyn Illinois debtor estimates value at \$270,000-\$280,000 based on market less cost of sale of \$20,000.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$260,000.00

Check if this is community property

Part 2: Describe Your Vehicles

County

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Other information you wish to add about this item, such as local

Official Form 106A/B Schedule A/B: Property page 1

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Michael a J Egert Case number (if known)

Ins., trucks, tractors, sport utility vehicles, motorcycles

| Cars, vans | , trucks, tractors | , opon a, 10 | • | | |
|--|--|---|--|--|---|
| □No | | | | | |
| Yes | | | | | |
| _ 105 | | | | | |
| .1 Make: | Ford | | Who has an interest in the property? Check one | Do not deduct secured cla | aims or exemptions. Put |
| Model: | Escape | | Debtor 1 only | the amount of any secure Creditors Who Have Clair | |
| Year: | 2012 | | Debtor 2 only | | |
| | mate mileage: | 89000 | ■ Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | formation: | | ■ At least one of the debtors and another | chare property: | portion you own: |
| | | | - 7 k loads one of the appeals and allother | | |
| | | | ☐ Check if this is community property (see instructions) | \$8,000.00 | \$8,000.0 |
| .2 Make: | Ford | | Who has an interest in the property? Check one | Do not deduct secured cluthe amount of any secure | |
| Model: | Freestyle | | ☐ Debtor 1 only | Creditors Who Have Clair | |
| Year: | 2006 | | Debtor 2 only | Current value of the | Current value of the |
| Approxi | mate mileage: | 110000 | ■ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| Other in | formation: | | ☐ At least one of the debtors and another | | |
| | | | | \$2,400.00 | ¢2.400.0 |
| | | | ☐ Check if this is community property (see instructions) | Ψ2,400.00 | \$2,400.0 |
| ■ No □ Yes | | | atercraft, fishing vessels, snowmobiles, motorcycle | | |
| ☐ Yes Add the d | | | n for all of your entries from Part 2, including a that number here | any entries for | \$10,400.00 |
| ☐ Yes Add the d .pages you | | or Part 2. Write | n for all of your entries from Part 2, including a that number here | any entries for | \$10,400.00 |
| Add the d | i have attached f | or Part 2. Write | n for all of your entries from Part 2, including a that number here | any entries for | \$10,400.00 Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Add the d.pages you own Household Examples. | ibe Your Personal a or have any lega I goods and furn Major appliances | or Part 2. Write and Household Ite I or equitable in ishings | n for all of your entries from Part 2, including a that number here | any entries for | Current value of the portion you own? Do not deduct secured |
| Add the donages you own Household Examples: | ibe Your Personal a or have any lega I goods and furn Major appliances | or Part 2. Write and Household Ite I or equitable in ishings i, furniture, linens | n for all of your entries from Part 2, including a that number herems ms terest in any of the following items? , china, kitchenware | any entries for | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Add the depages you own Household Examples: | ibe Your Personal a or have any lega I goods and furn Major appliances | or Part 2. Write and Household Ite I or equitable in ishings i, furniture, linens | n for all of your entries from Part 2, including a that number herems ms terest in any of the following items? | any entries for | Current value of the portion you own? Do not deduct secure claims or exemptions. |
| Add the dipages you own Household Examples: No Yes. Description of the control | I have attached fibe Your Personal a or have any legan I goods and furn Major appliances escribe | or Part 2. Write and Household Ite I or equitable in ishings i, furniture, linens ersonal posse radios; audio, vide | n for all of your entries from Part 2, including a that number herems ms terest in any of the following items? , china, kitchenware | any entries for | Current value of the portion you own? Do not deduct secured claims or exemptions. \$1,000. |
| Add the dipages you own Household Examples: No Yes. Description of the control | I have attached for the Your Personal at the Your Personal Attached to the Your P | or Part 2. Write and Household Ite I or equitable in ishings i, furniture, linens ersonal posse radios; audio, vide | rn for all of your entries from Part 2, including a that number here | any entries for | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Add the dipages you own Household Examples: No Yes. Do Electronic Examples: No Yes. Do Collectible | I have attached for the Your Personal at or have any legan and furn Major appliances escribe Personal attached for the Your Personal at the Your Personal at the Your Personal attached and furn Major appliances escribe Personal attached for Personal attached and furn Major appliances escribe Personal attached for Personal attached and furn Major appliances escribe Personal attached for Personal attached and furn Major appliances escribe | and Household Ite I or equitable in ishings in furniture, linens ersonal posse radios; audio, vide ones, cameras, m | In for all of your entries from Part 2, including a that number here | ers, scanners; music collect | Current value of the portion you own? Do not deduct secured claims or exemptions. \$1,000. |

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1 Debtor 2

Case 17-26170 Doc 1 Filed 08/31/17 Entered 08/31/17 10:29:37 Desc Main Page 12 of 66 Document Debtor 1 Michael E Egert Debtor 2 Michaela J Egert Case number (if known) 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$800.00 Personal clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No ■ Yes. Describe..... \$300.00 Wedding ring 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,100.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar

institutions. If you have multiple accounts with the same institution, list each.

☐ No

Institution name: Yes.....

> **PNC Bank** 17.1. Checking

Official Form 106A/B Schedule A/B: Property page 3

\$1,000.00

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Michael E Egert Case number (if known)

s, mutual funds, or publicly traded stocks apples: Bond funds, investment accounts with brokerage firms, money market accounts

| 18. | | s, or publicly traded stocks ds, investment accounts with | brokerage firms, money mark | et accounts | |
|-----|--|--|---|---|---|
| | ☐ Yes | Institution or issu | er name: | | |
| | Non-publicly traded and joint venture ■ No | stock and interests in inco | rporated and unincorporated | d businesses, including an interes | et in an LLC, partnership, |
| | ☐ Yes. Give specific | information about them Name of entity: | | % of ownership: | |
| | Negotiable instrumer | nts include personal checks, | egotiable and non-negotiable cashiers' checks, promissory r transfer to someone by signin | notes, and money orders. | |
| | Yes. Give specific in | nformation about them Issuer name: | | | |
| | Retirement or pension Examples: Interests i □ No | |), 403(b), thrift savings accour | nts, or other pension or profit-sharing | plans |
| | Yes. List each acco | ount separately. Type of account: | Institution name: | | |
| | | Pension | IMRF | | \$0.00 |
| | | ESOP | Employer | | \$11,600.00 |
| | | sed deposits you have made | eso that you may continue sen nt, public utilities (electric, gas Institution name or in | , water), telecommunications compar | nies, or others |
| | ■ No | | oney to you, either for life or fo | r a number of years) | |
| | | Issuer name and description | | | |
| | | tion IRA, in an account in a), 529A(b), and 529(b)(1). | a qualified ABLE program, o | r under a qualified state tuition pro | ogram. |
| | | Institution name and descrip | tion. Separately file the record | s of any interests.11 U.S.C. § 521(c) | : |
| | ■ No | , | (other than anything listed | in line 1), and rights or powers exe | ercisable for your benefit |
| | · | information about them | | | |
| | Examples: Internet de | omain names, websites, prod | and other intellectual prope ceeds from royalties and licens | | |
| | ☐ Yes. Give specific | information about them | | | |
| | | s, and other general intangi ermits, exclusive licenses, co | | s, liquor licenses, professional licens | es |
| | ☐ Yes. Give specific | information about them | | | |
| M | oney or property owe | d to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1 Debtor 2

| | Case 17-26170 | Doc 1 | Filed 08/31/17 Document | Entered 08/31/17 10:29:37 Page 14 of 66 | Desc Main |
|---------------------------|---|-----------------------------|---------------------------------------|--|----------------------------|
| Debtor 1 Debtor 2 | Michael E Egert Michaela J Egert | | | Case number (if known) | |
| 28. Tax re ■ No | efunds owed to you | | | | |
| ☐ Yes | . Give specific information a | bout them, in | cluding whether you alre | eady filed the returns and the tax years | |
| ■ No | | | usal support, child supp | oort, maintenance, divorce settlement, propert | y settlement |
| Exam | amounts someone owes y apples: Unpaid wages, disabilibenefits; unpaid loans . Give specific information | ty insurance | | nefits, sick pay, vacation pay, workers' compe | ensation, Social Security |
| | sts in insurance policies pples: Health, disability, or lif | e insurance; | nealth savings account | (HSA); credit, homeowner's, or renter's insura | nnce |
| ■ Yes | . Name the insurance compa Com | any of each p pany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |
| | Terr | n life insur | ance | | \$0.00 |
| | Terr | n life insur | ance | | \$0.00 |
| If you some ■ No □ Yes | one has died. Give specific information | g trust, expe | ct proceeds from a life in | ed nsurance policy, or are currently entitled to rec | ceive property because |
| Exam ■ No | oples: Accidents, employments. Describe each claim | nt disputes, ir | | | |
| ■ No | contingent and unliquidat | ed claims of | every nature, includir | ng counterclaims of the debtor and rights t | o set off claims |
| | nancial assets you did not | already list | | | |
| ■ No □ Yes | . Give specific information | | | | |
| | • | | · · · · · · · · · · · · · · · · · · · | nny entries for pages you have attached | \$12,600.00 |
| Part 5: De | escribe Any Business-Related | Property You | Own or Have an Interest Ir | n. List any real estate in Part 1. | |
| | own or have any legal or equit o to Part 6. | able interest i | n any business-related pro | operty? | |

Official Form 106A/B Schedule A/B: Property page 5

 \square Yes. Go to line 38.

Case 17-26170 Doc 1 Filed 08/31/17 Entered 08/31/17 10:29:37 Desc Main Page 15 of 66 Document Michael E Egert Debtor 1 Debtor 2 Michaela J Egert Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$260,000.00 Part 2: Total vehicles, line 5 \$10,400.00 57. Part 3: Total personal and household items, line 15 \$2,100.00 Part 4: Total financial assets, line 36 \$12,600.00

\$0.00

\$0.00

\$0.00

Copy personal property total

\$25,100.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

59. Part 5: Total business-related property, line 45

61. Part 7: Total other property not listed, line 54

60. Part 6: Total farm- and fishing-related property, line 52

Total personal property. Add lines 56 through 61...

\$285,100.00

\$25,100.00

Case 17-26170 Doc 1 Filed 08/31/17 Entered 08/31/17 10:29:37 Desc Main

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1 | Michael E Egert | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Michaela J Egert | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Amount of the exemption you claim

| Part 1: Identify the Property You Claim as Exe |
|--|
|--|

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the

| Schedule A/B that lists this property | portion you own | | • • | · |
|---|-------------------------------------|-----|---|-----------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 22W732 Hackberry Dr Glen Ellyn, IL 60137 DuPage County | \$260,000.00 | | \$30,000.00 | 735 ILCS 5/12-901 |
| Single Family Home - 22W732 Hackberry Dr, Glen Ellyn Illinois debtor estimates value at \$270,000-\$280,000 based on market less cost of sale of \$20,000. Line from <i>Schedule A/B</i> : 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2006 Ford Freestyle 110000 miles Line from Schedule A/B: 3.2 | \$2,400.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| Line nom Schedule AVD. 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Personal possession in home at liquidation value | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Personal clothing Line from Schedule A/B: 11.1 | \$800.00 | | \$800.00 | 735 ILCS 5/12-1001(a) |
| Line nom concodic AD. | | | 100% of fair market value, up to any applicable statutory limit | |

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Michael E Egert Debtor 1 Michaela J Egert Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Wedding ring 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking: PNC Bank** 735 ILCS 5/12-1001(b) \$1,000.00 \$1,000.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Pension: IMRF** 735 ILCS 5/12-1006 \$0.00 \$0.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **ESOP: Employer** 735 ILCS 5/12-1006 \$11,600.00 \$11,600.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit Term life insurance 215 ILCS 5/238 \$0.00 \$0.00 Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit Term life insurance 215 ILCS 5/238 \$0.00 \$0.00 Line from Schedule A/B: 31.2 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

- ☐ No
- ☐ Yes

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| | | Document P | age 18 d | of 66 | | |
|--------------------------------------|------------------------------|---|----------------|-----------------------------------|--|-------------------|
| Fill in this informat | ion to identify you | ur case: | | | | |
| _ | Michael E Egert | | | | | |
| | First Name | | st Name | | | |
| | Michaela J Ege First Name | | st Name | | | |
| (Spouse II, IIIIIIg) | i iist ivailie | Middle Name La | St Ivallie | | | |
| United States Bankr | uptcy Court for the | : NORTHERN DISTRICT OF ILLINC | DIS | | | |
| Case number | | | | | | |
| (if known) | | | | | _ | if this is an |
| | | | | | amend | ed filing |
| Official Form 1 | IOED | | | | | |
| | | | | | | |
| Schedule D | : Creditors | Who Have Claims Se | cured | by Propert | У | 12/15 |
| | | f two married people are filing together, bo , number the entries, and attach it to this fo | | | | |
| 1. Do any creditors hav | e claims secured by | your property? | | | | |
| ☐ No. Check thi | is box and submit t | this form to the court with your other sch | nedules. You | u have nothing else | to report on this form. | |
| Yes Fill in all | of the information | helow | | _ | | |
| | | below. | | | | |
| • | ecured Claims | | | Column A | Column B | Column C |
| each claim. If more tha | n one creditor has a p | nore than one secured claim, list the creditor s particular claim, list the other creditors in Part 2 ler according to the creditor's name. | | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| The possible, list the slan | no in dipridoctiodi cid | or according to the creater of hame. | | value of collateral. | claim | If any |
| 2.1 Citizens Ban | ık | Describe the property that secures the cl | laim: | \$9,528.00 | \$8,000.00 | \$1,528.00 |
| Creditor's Name | | 2012 Ford Escape 89000 miles | | | | |
| Attn: Bankru | | | | | | |
| 443 Jefferso Riw-135 | n biva ivis | As of the date you file, the claim is: Check | call that | | | |
| Warwick, RI | 02886 | apply. Contingent | | | | |
| Number, Street, City | | Unliquidated | | | | |
| riambol, etroot, en | ,, c.a.c a 2.p coac | ☐ Disputed | | | | |
| Who owes the debt? | Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mortg | gage or secure | ed | | |
| Debtor 2 only | | car loan) | | | | |
| ■ Debtor 1 and Debto | r 2 only | ☐ Statutory lien (such as tax lien, mechani | c's lien) | | | |
| ☐ At least one of the d | ebtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim community debt | relates to a | Other (including a right to offset) | | | | |
| | Opened | | | | | |
| | 8/01/12 | | | | | |
| | Last Active | | 4670 | | | |
| Date debt was incurre | d <u>8/27/15</u> | Last 4 digits of account number | 1678 | | | |
| 2.2 PNC Bank M | ortagae | Describe the property that secures the cl | laim· | \$183,000.00 | \$260,000.00 | \$0.00 |
| Creditor's Name | ortgage | 22W732 Hackberry Dr Glen Elly | | φ103,000.00 | Ψ200,000.00 | Ψ0.00 |
| | | 60137 DuPage County | , | | | |
| | | Single Family Home - 22W732 | | | | |
| | | Hackberry Dr, Glen Ellyn Illinois | S | | | |
| | | debtor estimates value at | | | | |
| | | \$270,000-\$280,000 based on ma | arket | | | |
| | _ | less cost of sale of \$20,000. As of the date you file, the claim is: Check | call that | | | |
| 3232 Newark | | apply. | | | | |
| Miamisburg, | | Contingent | | | | |
| Number, Street, City | y, State & Zip Code | ☐ Unliquidated | | | | |
| Who owes the debt? | Chack and | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| _ | OHECK UHE. | | 1000 or 222: | ad. | | |
| ☐ Debtor 1 only | | ☐ An agreement you made (such as mortg car loan) | gage or secure | , u | | |

Official Form 106D

Debtor 2 only

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| Debtor | 1 Michael E Egert | | · | Case number (if know) | | |
|------------------|---|--|---|--|-------------------------------|------------|
| | | liddle Name | Last Name | , | | |
| Debtor | | | | | | |
| | First Name M | fiddle Name | Last Name | | | |
| ■ Debt | tor 1 and Debtor 2 only | ☐ Statu | tory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At le | ast one of the debtors and and | other | ment lien from a lawsuit | | | |
| | ck if this claim relates to a nmunity debt | ■ Other | r (including a right to offset) | | | |
| Date de | bt was incurred | L | ast 4 digits of account number | | | |
| 2.3 P | NC Mortgage | Describe | the property that secures the claim: | \$33,254.00 | \$260,000.00 | \$0.00 |
| Cı | reditor's Name | 60137 Single Hackb debtor \$270,0 less co | 22 Hackberry Dr Glen Ellyn, IL DuPage County Family Home - 22W732 erry Dr, Glen Ellyn Illinois estimates value at 00-\$280,000 based on market ost of sale of \$20,000. | | | |
| | N Main Street | As of the apply. | e date you file, the claim is: Check all that | | | |
| D | ayton, OH 45402 | Conti | ngent | | | |
| N | umber, Street, City, State & Zip Coo | de 🔲 Unliq | uidated | | | |
| Mha a | was the debt O | ☐ Dispu | | | | |
| _ | wes the debt? Check one. | _ | of lien. Check all that apply. | | | |
| | tor 1 only tor 2 only | Car l | greement you made (such as mortgage or soan) | secured | | |
| Debt | tor 1 and Debtor 2 only | ☐ Statu | tory lien (such as tax lien, mechanic's lien) | | | |
| At le | ast one of the debtors and and | other 🔲 Judgi | ment lien from a lawsuit | | | |
| | ck if this claim relates to a nmunity debt | Other | r (including a right to offset) | | | |
| Date de | bt was incurred | L | ast 4 digits of account number | | | |
| If this Write | he dollar value of your entrie is the last page of your form that number here: List Others to Be Notif | ı, add the dollar v | | \$225,782. \$225,782. | | |
| to collector | ct from you for a debt you ov | ve to someone e | bout your bankruptcy for a debt that you ise, list the creditor in Part 1, and then li list the additional creditors here. If you | st the collection agency here. | . Similarly, if you have more | e than one |
| 1 | Name, Number, Street, City, St National City Mortgage Attn: Bankruptcy Depa 3232 Newmark Dr. Miamisburg, OH 45342 | e/PNC Mtg artment | | which line in Part 1 did you ente 4 digits of account number | r the creditor? _2.2_ | |
| F | Name, Number, Street, City, St Pnc Bank Na Po Box 3180 Pittsburgh, PA 15222 | tate & Zip Code | | which line in Part 1 did you ente | r the creditor? 2.3 | |

| | Cas | e 17-2017U | DOC I F | Document | Page 2 | tu 08/31/17 10./ 0 of 66 | 29.37 D | esc Main |
|-----------|-------------------------------------|---|--------------------|--|-------------------|---|---------------------|---------------------------------------|
| Fill in t | this inform | ation to identify you | ır case: | Document | r aut. Z | o or oo | | |
| | | | | | | | | |
| Debtor | 1 | Michael E Egert | Middle I | Namo | Last Name | | | |
| Debtor | 2 | Michaela J Ege | | varie | Lastivanie | | | |
| (Spouse | | First Name | Middle I | Name | Last Name | | | |
| United | States Ban | kruptcy Court for the | NORTHER | N DISTRICT OF ILL | INOIS | | | |
| Case n | number | | | | | | | |
| (if known | | | | <u>—</u> | | | | Check if this is an |
| | | | | | | | | amended filing |
| O#: a: | al Farma | 400E/E | | | | | | |
| | | <u>106E/F</u> | Mba Hayra | Llmaaaurad | Claima | | | 40/4E |
| | | F: Creditors | | | | | | 12/15 ims. List the other party to |
| Part 1: | (if known). List All any creditors | of Your PRIORITY Is have priority unsecur | Jnsecured Cla | ims | uo not me ma | t Part. On the top of any a | auditional pages | s, write your name and case |
| | No. Go to Pai | t 2. | | | | | | |
| | Yes. | | | | | | | |
| Part 2: | List All | of Your NONPRIOR | ITY Unsecure | d Claims | | | | |
| 3. Do | any creditors | s have nonpriority unse | ecured claims ag | jainst you? | | | | |
| | No. You have | nothing to report in this | part. Submit this | form to the court with yo | our other sched | dules. | | |
| _ | Yes. | | | | | | | |
| 4. List | t all of your n m, list the cre | ditor separately for each | claim. For each | claim listed, identify wha | t type of claim | nolds each claim. If a credit is. Do not list claims alre | ady included in P | |
| Ol O | antor riolad a p | artiodiar olami, not trio o | inor oroanoro in r | art o.ii you navo moro t | nan anoo non | onomy unocoured ciaims in | ii out the continue | Total claim |
| | ACS/Ban | k of America/Edu | ıcation | | | | | |
| 4.1 | Services | | ication | Last 4 digits of acco | unt number | 8961 | | \$0.00 |
| | | Creditor's Name | | | | | | |
| | Po Box 9 | ims Department | | When was the debt i | ncurred? | Opened 5/05/08 2/17/10 | Last Active | |
| | | arre, PA 18773 | | When was the debt i | nourcu. | 2/11/10 | | |
| | | eet City State Zlp Code | | As of the date you fi | le, the claim is | s: Check all that apply | | |
| | Who incurr | ed the debt? Check one | Э. | ☐ Contingent | | | | |
| | Debtor 1 | only | | ☐ Unliquidated | | | | |
| | Debtor 2 | only | | ☐ Disputed | | | | |
| | Debtor 1 | and Debtor 2 only | | Type of NONPRIORI | TY unsecured | l claim: | | |
| | ☐ At least of | one of the debtors and a | nother | Student loans | | | | |
| | | this claim is for a cor subject to offset? | nmunity debt | Obligations arising report as priority claim | | ration agreement or divorce | e that you did not | |
| | ■ No | | | Debts to pension of | or profit-sharing | g plans, and other similar d | lebts | |
| | Пуев | | | Other Specify | | | | |

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| Debtor | 2 Michaela J Egert | Case number (if know) | | | | | | |
|--------|---|--|--|-------------|--|--|--|--|
| 4.2 | Atlantic Crd | Last 4 digits of account number | 4278 | \$2,167.00 | | | | |
| | Nonpriority Creditor's Name P O Box 13386 Roanoke, VA 24033 | When was the debt incurred? | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | | | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | | | | | |
| | \square At least one of the debtors and another | ☐ Student loans | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify 01 Citibank | N A | | | | | |
| 4.3 | Bank of America | Last 4 digits of account number | 6344 | \$0.00 | | | | |
| | Nonpriority Creditor's Name Attn: Recovery Department 4161 Piedmont Pkwy | When was the debt incurred? | Opened 3/01/03 Last Active 9/16/03 | | | | | |
| | Greensboro, NC 27410 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | As of the date you me, the claim i | s. Oneon all that apply | | | | | |
| | ☐ Debtor 1 only | Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | |
| | _ | ☐ Student loans | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | | | | | | |
| | No | Debts to pension or profit-sharin | | | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | | | |
| 4.4 | Bank of America | Last 4 digits of account number | 991 | \$21,850.00 | | | | |
| | Nonpriority Creditor's Name Attn: Recovery Department 4161 Piedmont Pkwy | When was the debt incurred? | Opened 9/01/91 Last Active 10/10/05 | | | | | |
| | Greensboro, NC 27410 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | ☐ Debtor 1 only | Contingent | | | | | | |
| | ☐ Debtor 2 only | Unliquidated | | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ration agreement or divorce that you did not | | | | | | |
| | <u> </u> | report as priority claims Debts to pension or profit-sharin | n plans, and other similar debte | | | | | |
| | ■ No | □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card | | | | | | |
| | Yes | | | | | | | |

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| | Michaela J Egert Michaela J Egert | | Case number (if know) | | | | |
|-----|---|---|--|--------|--|--|--|
| 4.5 | Bank of America | Last 4 digits of account number | 5429 | \$0.00 | | | |
| | Nonpriority Creditor's Name Attn: Recovery Department 4161 Piedmont Pkwy Greensboro, NC 27410 | When was the debt incurred? | Opened 4/01/06 Last Active 8/30/13 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | _ | Type of NONPRIORITY unsecured | I claim: | | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Credit Card | 1 | | | | |
| 4.6 | Cap1/carsn | Last 4 digits of account number | 0591 | \$0.00 | | | |
| | Nonpriority Creditor's Name | | On an all 0/00/04 Last Astissa | | | | |
| | Po Box 30253 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 6/22/01 Last Active 6/29/12 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | Continuent | | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | | |
| | ■ Debtor 2 only | Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | |
| | | Student loans | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | | | | | |
| | No | ☐ Debts to pension or profit-sharin | | | | | |
| | Yes | ■ Other. Specify Charge Ac | count | | | | |
| 4.7 | Capital One | Last 4 digits of account number | 9733 | \$0.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 | When was the debt incurred? | Opened 3/01/08 Last Active 8/01/15 | | | | |
| | Salt Lake City, UT 84130 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | | |
| | ■ Debtor 1 only | <u>.</u> | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | | | | | |
| | ☐ At least one of the debtors and another | Student loans | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | - | | | | | |
| | ■ No | □ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Yes | ■ Other. Specify Credit Card | | | | | |
| | | — Other. opening | | | | | |

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| | r 2 Michaela J Egert | | Case number (if know) | |
|------|---|--|---|--------|
| 4.8 | Capital One | Last 4 digits of account number | 5978 | \$0.00 |
| | Nonpriority Creditor's Name Attn: General Correspondence PO Box 30285 | When was the debt incurred? | Opened 8/05/11 Last Active 8/16/13 | |
| | Salt Lake City, UT 84130-0285 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | <u>_</u> | or onook all that apply | |
| | ■ Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| 4.9 | Capital One | Last 4 digits of account number | 5130 | \$0.00 |
| | Nonpriority Creditor's Name Attn: General Correspondence PO Box 30285 Salt Lake City, UT 84130-0285 | When was the debt incurred? | Opened 3/01/04 Last Active 9/10/05 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | _ | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | 1 claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | a Guini. | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | indicin agreement or alverse that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| 4.10 | Chase Card Services | Last 4 digits of account number | 2294 | \$0.00 |
| | Nonpriority Creditor's Name Attn:Bankruptcy Dept Po Box 15298 Wilmington, DE 10050 | When was the debt incurred? | Opened 6/01/95 Last Active 8/30/13 | |
| | Wilmington, DE 19850 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | , | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | Disputed | Jalaina. | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | л Станті. | |
| | ☐ Check if this claim is for a community debt | | uration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Card | d | |
| | | — Other opening | | |

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| | 2 Michaela J Egert | | Case number (if know) | | | | |
|------|---|--|--|--------|--|--|--|
| 4.11 | Chase Card Services Nonpriority Creditor's Name | Last 4 digits of account number | 8043 | \$0.00 | | | |
| | Attn:Bankruptcy Dept Po Box 15298 | When was the debt incurred? | Opened 5/01/93 Last Active 8/25/13 | | | | |
| | Wilmington, DE 19850 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | _ | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l alaim. | | | | |
| | ☐ At least one of the debtors and another | Student loans | i Claiii. | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | □ Yes | ■ Other. Specify Credit Card | | | | | |
| | | | | | | | |
| 4.12 | Citi Student Loans Nonpriority Creditor's Name | Last 4 digits of account number | 9621 | \$0.00 | | | |
| | Attn: Legal | | Opened 10/01/08 Last Active | | | | |
| | PO Box 6191 | When was the debt incurred? | 9/30/09 | | | | |
| | Sioux Falls, SD 57117-6191 Number Street City State Zlp Code | As of the data you file the claim i | a. Check all that apply | | | | |
| | Who incurred the debt? Check one. | As of the date you file, the claim i | 5. Спеск ан шасарру | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Onliquidated | | | | | | |
| | Debtor 2 only | ☐ Disputed | | | | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | i claim: | | | | |
| | At least one of the debtors and another | Student loans | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify | | | | | |
| 4.13 | Citi Student Loans | Last 4 digits of account number | 9625 | \$0.00 | | | |
| | Nonpriority Creditor's Name Attn: Legal | | Opened 8/01/09 Last Active | | | | |
| | PO Box 6191 | When was the debt incurred? | 12/31/09 | | | | |
| | Sioux Falls, SD 57117-6191 | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | | |
| | Debtor 2 only | ☐ Disputed | | | | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | |
| | At least one of the debtors and another | Student loans | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify | | | | | |
| | | | | | | | |

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| Debtor | ² Michaela J Egert | | Case number (if know) | | | |
|--------|--|--|--|--------|--|--|
| 4.14 | Citi Student Loans | Last 4 digits of account number | 9623 | \$0.00 | | |
| | Nonpriority Creditor's Name Attn: Legal PO Box 6191 Sioux Falls, SD 57117-6191 | When was the debt incurred? | Opened 10/20/08 Last Active 2/17/10 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 2 only | □ Disputed | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | | | |
| | ☐ At least one of the debtors and another | Student loans | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | Yes | Other. Specify | | | | |
| 4.15 | Citi Student Loans Nonpriority Creditor's Name | Last 4 digits of account number | 9622 | \$0.00 | | |
| | Attn: Legal PO Box 6191 | When was the debt incurred? | Opened 10/01/08 Last Active 9/30/09 | | | |
| | Sioux Falls, SD 57117-6191 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | Debtor 2 only | <u> </u> | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ At least one of the debtors and another | Student loans | | | | |
| | ☐ Check if this claim is for a community debt | _ | ration agreement or divorce that you did not | | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | ☐ Yes | ☐ Other. Specify | | | | |
| | | | | | | |
| 4.16 | Citi Student Loans Nonpriority Creditor's Name | Last 4 digits of account number | 9624 | \$0.00 | | |
| | Attn: Legal PO Box 6191 | When was the debt incurred? | Opened 8/01/09 Last Active 12/31/09 | | | |
| | Sioux Falls, SD 57117-6191 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ At least one of the debtors and another | Student loans | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | ☐ Yes | Other, Specify | | | | |
| | — · | | | | | |

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| | Michael E Egert Michaela J Egert | | Case number (if know) | |
|------|--|---|--|------------|
| 4.17 | Citi Student Loans Nonpriority Creditor's Name | Last 4 digits of account number | 9620 | \$0.00 |
| | Attn: Legal PO Box 6191 Sioux Falls, SD 57117-6191 | When was the debt incurred? | Opened 10/01/08 Last Active 9/30/09 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | \square At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | □Yes | Other. Specify | | |
| | | Educationa | | |
| 4.18 | Citibank | Last 4 digits of account number | 3671 | \$0.00 |
| | Nonpriority Creditor's Name Citicorp Credt Srvs/Centralized Bankrupt Po Box 790040 | When was the debt incurred? | Opened 5/01/02 Last Active 9/29/03 | |
| | Saint Louis, MO 63179 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.19 | Comenity Bank/Carsons Nonpriority Creditor's Name | Last 4 digits of account number | 7569 | \$3,879.00 |
| | Po Box 182125 Columbus, OH 43218 | When was the debt incurred? | Opened 7/26/12 Last Active 9/03/13 | |
| - | Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ☐ Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | □Yes | ■ Other. Specify Charge Acc | count | |
| | | Calon opeony | | |

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Debtor 1 Michael E Egert Debtor 2 Michaela J Egert Case number (if know) \$20,401.00 4.20 Dept Of Education/neln Last 4 digits of account number 4074 Nonpriority Creditor's Name Opened 9/01/10 Last Active 121 S 13th St When was the debt incurred? 9/28/15 Lincoln, NE 68508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.21 Dpt Ed/slm Last 4 digits of account number 1151 \$0.00 Nonpriority Creditor's Name Opened 8/01/09 Last Active Po Box 9635 When was the debt incurred? 10/12/10 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational 4.22 Edsouth W/jp Morgan Last 4 digits of account number 0002 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. Opened 5/05/08 Last Active When was the debt incurred? Po Box 36014 2/17/09 Knoxville, TN 37930 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify

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| | Michaela J Egert Michaela J Egert | | Case number (if know) | |
|------|---|--|--|--------|
| 4.23 | Edsouth W/jp Morgan Nonpriority Creditor's Name | Last 4 digits of account number | 0001 | \$0.00 |
| | Attn: Bankruptcy Dept. Po Box 36014 | When was the debt incurred? | Opened 5/01/08 Last Active 1/01/09 | |
| | Knoxville, TN 37930 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that annly | |
| | Who incurred the debt? Check one. | | S. Oneck all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 2 only | Disputed | | |
| | | Type of NONPRIORITY unsecured | i claim: | |
| | At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | Educationa | al | |
| 4.24 | Feb/frys | Last 4 digits of account number | 2470 | \$0.00 |
| | Nonpriority Creditor's Name | | Opened 4/01/08 Last Active | |
| | 11781 S. Lone Peak Pkwy #135 Draper, UT 84020 | When was the debt incurred? | 3/03/10 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Ac | count | |
| 4.25 | Fed Loan Serv | Last 4 digits of account number | 0008 | \$0.00 |
| | Nonpriority Creditor's Name | | 0 1 0/00/00 1 1 0/ | |
| | Po Box 60610 Harrisburg, PA 17106 | When was the debt incurred? | Opened 9/08/09 Last Active 5/14/14 | |
| : | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | □ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Educationa | al | |

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| | 1 Michael E Egert 2 Michaela J Egert | | Case number (if know) | |
|------|---|---|--|-------------|
| 4.26 | Fed Loan Serv Nonpriority Creditor's Name | Last 4 digits of account number | 0009 | \$23,819.00 |
| | Po Box 60610 Harrisburg, PA 17106 | When was the debt incurred? | Opened 8/01/09 Last Active 9/30/15 | |
| - | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | 163 | Educationa | | |
| | | | | |
| | Kohls/capone Nonpriority Creditor's Name | Last 4 digits of account number | | \$3,297.00 |
| | N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 | When was the debt incurred? | Opened 3/01/00 Last Active 9/16/13 | |
| - | Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | | |
| 4.28 | Pnc Bank | Last 4 digits of account number | 3815 | \$2,286.00 |
| | Nonpriority Creditor's Name 6750 Miller Road Brecksville, OH 44141 | When was the debt incurred? | Opened 10/01/09 Last Active 9/11/15 | |
| - | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | _ | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | claim: | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Check Cree | dit Or Line Of Credit | |

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Debtor 1 Michael E Egert Debtor 2 Michaela J Egert Case number (if know) 4.29 Pnc Bank Last 4 digits of account number 0001 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 8/01/12 Last Active 2730 Liberty Ave When was the debt incurred? 9/24/15 Pittsburgh, PA 15222 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Educational** 4.30 Portfolio Recovery Last 4 digits of account number 2192 \$967.00 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Opened 1/01/15 Po Box 41067 Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Synchrony** ☐ Yes Other. Specify Bank 4.31 Portfolio Recovery Last 4 digits of account number 7498 \$3,754.00 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Opened 1/01/15 Po Box 41067 Norfolk, VA 23541 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Factoring Company Account Citibank N.A. ☐ Yes

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| | or 2 Michaela J Egert | | Case number (if know) | |
|------|---|---|--|-------------|
| 4.32 | Portfolio Recovery | Last 4 digits of account number | 4522 | \$15,217.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 41067 | When was the debt incurred? | Opened 5/01/14 | . , |
| | Norfolk, VA 23541 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. ☐ Debtor 1 only | ☐ Contingent ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | · oranii | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | | Company Account U.S. Bank | |
| 4.33 | Sallie Mae | Last 4 digits of account number | 0819 | \$0.00 |
| | Nonpriority Creditor's Name Attn: Claims Department Po Box 9500 Wilkes Boxes BA 18773 | When was the debt incurred? | Opened 8/01/09 Last Active 4/01/10 | |
| | Wilkes-Barre, PA 18773 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | Educationa | | |
| 4.34 | Synchrony Bank/HH Gregg Nonpriority Creditor's Name | Last 4 digits of account number | 7586 | \$0.00 |
| | Attention: Bankruptcy Po Box 103106 | When was the debt incurred? | Opened 11/11/09 Last Active 11/26/10 | |
| | Roswell, GA 30076 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | Пол | | |
| | Debtor 1 only | Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | Student loans | · oranii. | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Charge Ac | count | |
| | | | | |

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| | r 2 Michaela J Egert | | Case number (if know) | |
|------|---|--|---|------------|
| 4.35 | Synchrony Bank/Mens Wearhouse | Last 4 digits of account number | 2192 | \$0.00 |
| | Nonpriority Creditor's Name Attn: bankruptcy | | Opened 11/06/03 Last Active | |
| | Po Box 103104 | When was the debt incurred? | 8/27/13 | |
| | Roswell, GA 30076 Number Street City State Zlp Code | As of the data way file the alaim i | a. Chaple all that apply | |
| | Who incurred the debt? Check one. | As of the date you file, the claim i | s: Cneck all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | I claim: | |
| | At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Charge Ac | • • | |
| | Li res | Other. Specify Official Ge Act | | |
| 4.36 | U S Dept Of Ed/fisl/at Nonpriority Creditor's Name | Last 4 digits of account number | 5568 | \$1,149.00 |
| | Attn: Bankruptcy | | Opened 8/01/09 Last Active | |
| | 61 Forsythe St Room 19t89 | When was the debt incurred? | 5/02/15 | |
| | Atlanta, GA 30303 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | | or or one and appropriate and | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt | _ | retion core ement or diverse that you did not | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | Educationa | nl . | |
| 4.37 | U S Dept Of Ed/fisl/at | Last 4 digits of account number | 4373 | \$1,596.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy 61 Forsythe St Room 19t89 | When was the debt incurred? | Opened 8/01/09 Last Active 5/02/15 | |
| | Atlanta, GA 30303 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | , | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Educationa | nl | |

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| | Michael E Egert Michaela J Egert | | Case number (if know) | |
|------|--|--|--|------------|
| 4.38 | U S Dept Of Ed/fisI/at Nonpriority Creditor's Name | Last 4 digits of account number | 5560 | \$2,412.00 |
| | Attn: Bankruptcy 61 Forsythe St Room 19t89 Atlanta, GA 30303 | When was the debt incurred? | Opened 10/01/08 Last Active 5/02/15 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | \square At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Educationa | al | |
| 4.39 | U S Dept Of Ed/fisI/at Nonpriority Creditor's Name | Last 4 digits of account number | 5573 | \$2,479.00 |
| | Attn: Bankruptcy 61 Forsythe St Room 19t89 | When was the debt incurred? | Opened 4/01/08 Last Active 5/02/15 | |
| | Atlanta, GA 30303 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | | or one or an end apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | Student loans | rolann. | |
| | ☐ Check if this claim is for a community debt | _ | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Educationa | al | |
| 4.40 | U S Dept Of Ed/fisl/at | Last 4 digits of account number | 4374 | \$2,538.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy 61 Forsythe St Room 19t89 Atlanta, GA 30303 | When was the debt incurred? | Opened 4/01/08 Last Active 5/02/15 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | _ | Education: | | |

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| | 1 Michael E Egert 2 Michaela J Egert | | Case number (if know) | |
|---|--|--|--|------------|
| | U S Dept Of Ed/fisl/at | Last 4 digits of account number | 4369 | \$3,373.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy 61 Forsythe St Room 19t89 Atlanta, GA 30303 | When was the debt incurred? | Opened 10/01/08 Last Active 5/02/15 | |
| _ | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | Educationa | al | |
| | U S Dept Of Ed/fisl/at | Last 4 digits of account number | 5564 | \$4,790.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy 61 Forsythe St Room 19t89 Atlanta, GA 30303 | When was the debt incurred? | Opened 10/01/08 Last Active 5/02/15 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐Yes | Other. Specify | | |
| | | Educationa | al | |
| | U S Dept Of Ed/fisl/at | Last 4 digits of account number | 4367 | \$7,898.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy 61 Forsythe St Room 19t89 Atlanta, GA 30303 | When was the debt incurred? | Opened 10/01/08 Last Active 5/02/15 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| | \square At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | □ Yes | Other. Specify | | |
| | - | Educationa | al | |

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| Debtor 2 | Michaela | J Egert | | Case n | umber (if know) | |
|---|--|--|---|-----------------------|--|--|
| _ | nvl/citi | | Last 4 digits of account number | 5816 | | \$0.00 |
| At Po | o Box 205 | alized Bankruptcy 07 | When was the debt incurred? | Oper 4/16/ | ned 3/01/01 Last Active 02 | |
| | | y, MO 64195 City State Zlp Code | As of the date you file, the claim is | : Check | all that apply | |
| | | he debt? Check one. | _ | . 0 | an inat apply | |
| | Debtor 1 onl | у | Contingent | | | |
| | Debtor 2 onl | у | Unliquidated | | | |
| | Debtor 1 and | d Debtor 2 only | Disputed | | | |
| | _ | of the debtors and another | Type of NONPRIORITY unsecured | claim: | | |
| | | s claim is for a community debt | ☐ Student loans | | | |
| | | bject to offset? | ☐ Obligations arising out of a separ report as priority claims | ation agr | eement or divorce that you did no | t |
| | No | • | Debts to pension or profit-sharing | g plans, a | and other similar debts | |
| |] Yes | | ■ Other. Specify Credit Card | | | |
| | s Bk Rms | | Last 4 digits of account number | 4522 | | \$0.00 |
| No | onpriority Cred | litor's Name | | Oner | ned 2/01/98 Last Active | |
| | o Box 108 t Louis, M | | When was the debt incurred? | 5/16/ | | |
| | | City State Zlp Code | As of the date you file, the claim is | : Check | all that apply | |
| WI | /ho incurred t | he debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 onl | у | | | | |
| | Debtor 2 onl | у | ☐ Unliquidated | | | |
| | Debtor 1 and | d Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | claim: | | |
| | At least one | of the debtors and another | ☐ Student loans | Olalili. | | |
| | Check if thi | s claim is for a community debt | ☐ Obligations arising out of a separ | ation and | reement or divorce that you did no | t |
| | | bject to offset? | report as priority claims | ation agi | oomone or arvoroo that you did no | |
| | No | | Debts to pension or profit-sharing | g plans, a | and other similar debts | |
| |] Yes | | Other. Specify Check Cred | lit Or L | ine Of Credit | |
| 5. Use this p trying to o more that any debts Part 4: | page only if y collect from y in one credito s in Parts 1 o | you for a debt you owe to someone or for any of the debts that you listed r 2, do not fill out or submit this pa mounts for Each Type of Unse | t your bankruptcy, for a debt that you e else, list the original creditor in Par ed in Parts 1 or 2, list the additional c ge. | ts 1 or 2 reditors | , then list the collection agency here. If you do not have addition | here. Similarly, if you have nal persons to be notified for |
| | | B | | | Total Claim | |
| Total claim | 6a. n s | Domestic support obligations | | 6a. | \$0. | .00 |
| from Part | | Taxes and certain other debts yo | ou owe the government | 6b. | \$0. | .00 |
| | 6c. | Claims for death or personal inju | | 6c. | | .00 |
| | 6d. | Other. Add all other priority unsecu | red claims. Write that amount here. | 6d. | \$0. | .00_ |
| | 6e. | Total Priority. Add lines 6a through | h 6d. | 6e. | \$0. | .00_ |
| | | | | | Total Claim | |
| Tatal -!-! | 6f. | Student loans | | 6f. | \$ 70,455. | 00 |
| Total claim from Part | | Obligations arising out of a sepa | ration agreement or divorce that you | _ | | 00 |
| | | did not report as priority claims | | 6g. | * | 00 |
| | 6h. | Debts to pension or profit-sharing | y pians, and other Similar depts | 6h. | \$ 0. | .00 |

Debtor 1 Michael E Egert

Other. Add all other nonpriority unsecured claims. Write that amount here. 6i.

53,417.00

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Debtor 1 Michael E Egert

Debtor 2 Michaela J Egert Case number (if know)

6j. **Total Nonpriority.** Add lines 6f through 6i.

6j. \$ **123,872.00**

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| | | DUGUITE | 11 FAUE 37 01 00 | |
|---------------------|--------------------------|-------------------|------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Michael E Egert | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Michaela J Egert | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Name Number Street State ZIP Code | | Person or | r company with Name, Numbe | n whom you have the r, Street, City, State and ZIP | contract or lease | State what the contract or lease is for |
|--|-----|-----------|-------------------------------|---|-------------------|---|
| Number Street City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Street Tip Code Street Tip Code Tip Co | 2.1 | | | | | |
| City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Number Street | | Name | | | | _ |
| Number Street | | Number | Street | | | _ |
| Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | City | | State | ZIP Code | |
| Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | 2.2 | | | | | |
| City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Name | | | | |
| 2.3 Number Street State ZIP Code 2.4 Number Street State ZIP Code City State ZIP Code City State ZIP Code 2.5 Name Number Street Street State ZIP Code Number Street Street | | Number | Street | | | _ |
| 2.3 Number Street State ZIP Code 2.4 Number Street State ZIP Code City State ZIP Code City State ZIP Code 2.5 Name Number Street Street State ZIP Code Number Street Street | | City | | State | ZIP Code | _ |
| Number Street City State ZIP Code 2.4 Number Street City State ZIP Code 2.5 Number Street Number Street Number Street | 23 | Oity | | Oldio | Zii Codo | |
| City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | 2.0 | Name | | | | |
| 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Number | Street | | | |
| Number Street City State ZIP Code 2.5 Name Number Street | | City | | State | ZIP Code | - |
| Number Street City State ZIP Code 2.5 Name Number Street | 2.4 | | | | | |
| City State ZIP Code 2.5 Name Number Street | | Name | | | | |
| Name Number Street | | Number | Street | | | |
| Number Street | | City | | State | ZIP Code | _ |
| Number Street | 2.5 | | | | | |
| | | Name | | | | _ |
| City State ZIP Code | | Number | Street | | | _ |
| | | City | | State | ZIP Code | - |

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| | | Document | Page 38 of | 66 | |
|--------------------|--|--|-----------------------|--|------------------------------------|
| Fill in this | information to identify your c | ase: | | | |
| Debtor 1 | Michael E Egert | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Michaela J Egert First Name | Middle Nove | Last Name | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT OF | FILLINOIS | | |
| Case numb | per | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | Form 106H ule H: Your Code | btors | | | 12/15 |
| ill it out, ar | filing together, both are equand number the entries in the land case number (if known). You have any codebtors? (If you | poxes on the left. Attach th Answer every question. | ne Additional Page to | this page. On the top of any | |
| 2. With | nin the last 8 years, have you a, California, Idaho, Louisiana, I | | | | and territories include |
| ■ No. | Go to line 3. | | | | |
| ☐ Yes. | Did your spouse, former spous | se, or legal equivalent live wi | ith you at the time? | | |
| in line Form 1 | umn 1, list all of your codebto 2 again as a codebtor only if I06D), Schedule E/F (Official I Column 2. | that person is a guarantor | or cosigner. Make s | ure you have listed the credi | tor on Schedule D (Officia |
| | Column 1: Your codebtor ame, Number, Street, City, State and ZIP | Code | | Column 2: The creditor to Check all schedules that ap | |
| 2 | Michael M Egert 2W732 Hackberry Dr Glen Ellyn, IL 60137 Son - co-signed student lo | an | | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G PNC Bank | |

Schedule H: Your Codebtors

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| Fill | in this information to identify your | case: | | | |
|-------------|--|---|-----------------------------------|--|-------|
| Del | otor 1 Michael E | Egert | | _ | |
| | otor 2 Michaela J | Egert | | _ | |
| Uni | ted States Bankruptcy Court for the | ne: NORTHERN DISTRI | CT OF ILLINOIS | _ | |
| | se number lown) | | _ | Check if this is: An amended filing A supplement showing postpetition chan 13 income as of the following date: | oter |
| 0 | fficial Form 106I | | | MM / DD/ YYYY | |
| S | chedule I: Your Ind | come | | | 12/15 |
| spo atta | use. If you are separated and you had separate sheet to this form the table of t | our spouse is not filing w . On the top of any addit | rith you, do not include infori | is living with you, include information about you mation about your spouse. If more space is need and case number (if known). Answer every que | ded, |
| 1. | Fill in your employment information. | | Debtor 1 | Debtor 2 or non-filing spouse | |
| | If you have more than one job, | Employment status | ☐ Employed | ■ Employed | |
| | attach a separate page with information about additional | Employment status | ■ Not employed | ☐ Not employed | |
| | employers. | Occupation | Branch Manager | Case Manager | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | Dupage County | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | 111 N County Farm Rd Wheaton, IL 60187 | |
| | | How long employed | there? | 22 years | |
| Par | t 2: Give Details About Me | onthly Income | | | |
| | mate monthly income as of the use unless you are separated. | date you file this form. If | you have nothing to report for | any line, write \$0 in the space. Include your non-fili | ng |
| | u or your non-filing spouse have r e space, attach a separate sheet t | | combine the information for all e | employers for that person on the lines below. If you | need |
| | | | | For Debtor 1 For Debtor 2 or non-filing spouse | |
| 2. | List monthly gross wages, sal deductions). If not paid monthly | | | \$ 0.00 \$ 4,344.00 | |

+\$

0.00

0.00

0.00

4,344.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

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| | tor 1 tor 2 | Michael E Egert Michaela J Egert | | Case r | number (<i>if known</i>) | | | | |
|-----|----------------|--|------------|--------|----------------------------|------|-----------|---------------|-------------------|
| | | | | For | Debtor 1 | | Debtor | | |
| | Cop | y line 4 here | 4. | \$ | 0.00 | \$ | 4 | ,344.00 |) |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | | 648.00 |) |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | - | 190.00 | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | | 0.00 | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | | 0.00 | _ |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | | 307.00 | _ |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | | 0.00 | - |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | | 0.00 |) |
| | 5h. | Other deductions. Specify: | _ 5h.+ | \$ | 0.00 | · \$ | | 0.00 |)_ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0.00 | \$ | 1 | ,145.00 | <u>)</u> |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | 3 | ,199.00 | <u>)</u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 922.00 | \$ | | 0.00 |) |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | | 0.00 | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | | 0.00 | _ |
| | 8d. | Unemployment compensation | 8d. | \$_ | 0.00 | \$ | | 0.00 | |
| | 8e. | Social Security | 8e. | \$ | 1,505.00 | \$ | | 0.00 | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. 8g. | \$ | 0.00 | \$ | | 0.00 | |
| | 8h. | Other monthly income. Specify: | 8h.+ | · — | 0.00 | | | 0.00 | _ |
| | OII. | other monthly medine. Opedity. | _ '''' | Ψ_ | 0.00 | | | 0.00 | <u>'</u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 2,427.00 | \$ | | 0.0 | 00 |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | 2 | 2,427.00 + \$_ | 3,1 | 99.00 | = \$ _ | 5,626.00 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify: | depen | | • | | | le J. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | e. 12. | \$ | 5,626.00 |
| 13 | Do | ou expect an increase or decrease within the year after you file this form | 2 | | | | | Comb month | ined ly income |
| | | No. | | | | | | | |

| Fill | in this informa | ition to identify yo | our case: | | | 1 | | | | |
|------------|--|--------------------------------------|--|--|----------------------------|---------------------|------------------|--|--|--|
| Deb | | Michael E Eg | | | | Ch | eck if this is: | | | |
| | 101 | WIICHAEL E EQ | <u>jert</u> | | | ☐ An amended filing | | | | |
| | tor 2 | Michaela J E | gert | | | | | showing postpetition chapter as of the following date: | | |
| (Spo | ouse, if filing) | | | | | | 13 expenses a | as of the following date: | | |
| Unit | ed States Bankr | uptcy Court for the: | NORTH | ERN DISTRICT OF ILLIN | OIS | | MM / DD / YY | YY | | |
| Cas | e number | | | | | | | | | |
| (If kı | nown) | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | | |
| | | J: Your I | Expen | ises | | | | 12/1 | | |
| Be info | as complete a ormation. If m mber (if know | and accurate as | s possible. eded, atta ry question | If two married people and the control of the contro | | | | ble for supplying correct rrite your name and case | | |
| 1. | Is this a joir | | illoiu | | | | | | | |
| | ☐ No. Go to | line 2. | | | | | | | | |
| | Yes. Doe | es Debtor 2 live | in a separa | ate household? | | | | | | |
| | ■ N | 0 | | | | | | | | |
| | □ Y | es. Debtor 2 mus | st file Offici | al Form 106J-2, Expenses | s for Separate Hous | ehold of D | ebtor 2. | | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | | |
| | Do not list D and Debtor 2 | | ☐ Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent age | 's Does dependent live with you? | | |
| | Do not state | the | | | | | | □ No | | |
| | dependents | names. | | | | | | Yes | | |
| | | | | | | | | □ No □ Yes | | |
| | | | | | | | | □ res □ No | | |
| | | | | | | | | Yes | | |
| | | | | | | | | □ No | | |
| 3. | Do your ove | enses include | _ | | - | | | D Yes | | |
| Э. | expenses of | f people other the d your depende | han \Box | No Yes | | | | | | |
| exp | imate your ex | | our bankrı | uptcy filing date unless y | | | | a Chapter 13 case to report top of the form and fill in the | | |
| the | lude expense value of sucl ficial Form 10 | h assistance an | non-cash o | government assistance i cluded it on <i>Schedule I:</i> ` | if you know Your Income | | Your | expenses | | |
| 4. | | or home owners | | ses for your residence. I r lot. | nclude first mortgag | je 4. | \$ | 2,335.00 | | |
| | If not includ | led in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 | | |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. | · | 0.00 | | |
| | | | • | ipkeep expenses | | 4c. | · : ——— | 30.00 | | |
| 5 | | owner's associat | | dominium dues our residence, such as ho | me equity loans | 4d. 5 | \$ \$ | 0.00 | | |

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| Debtor 1 | | _ | | | |
|------------------|---------------|--|---------------|--------------------|-----------------------------|
| Debtor 2 | Michaela | a J Egert | Case num | nber (if known) | |
| 6. Util i | ities: | | | | |
| 6a. | | , heat, natural gas | 6a. | \$ | 200.00 |
| 6b. | Water, se | wer, garbage collection | 6b. | \$ | 60.00 |
| 6c. | Telephon | e, cell phone, Internet, satellite, and cable services | 6c. | \$ | 315.00 |
| 6d. | Other. Sp | ecify: | 6d. | \$ | 0.00 |
| Foo | | sekeeping supplies | 7. | \$ | 604.00 |
| Chi | Idcare and | children's education costs | 8. | \$ | 0.00 |
| . Clo | thing, launc | dry, and dry cleaning | 9. | \$ | 50.00 |
| o. Per | sonal care | products and services | 10. | \$ | 90.00 |
| | | ental expenses | 11. | \$ | 100.00 |
| 2. Trai | nsportation | Include gas, maintenance, bus or train fare. | | | |
| | | car payments. | 12. | * | 200.00 |
| 3. Ent | ertainment, | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| 4. Cha | aritable conf | tributions and religious donations | 14. | \$ | 0.00 |
| | urance. | | | | |
| | | nsurance deducted from your pay or included in lines 4 or 20. | | | |
| | . Life insura | | 15a. | | 74.00 |
| | . Health ins | | 15b. | * | 0.00 |
| | . Vehicle in | | 15c. | · <u> </u> | 235.00 |
| | | urance. Specify: | 15d. | \$ | 0.00 |
| | | nclude taxes deducted from your pay or included in lines 4 or 20. employement tax on 1099 income | 16. | \$ | 70.00 |
| | | lease payments: | | | 70.00 |
| | | ents for Vehicle 1 | 17a. | \$ | 0.00 |
| | | ents for Vehicle 2 | 17b. | · | 0.00 |
| | . Other. Sp | ooifu | 17c. | \$ | 0.00 |
| | l. Other. Sp | | 17d. | | 0.00 |
| | | s of alimony, maintenance, and support that you did not report a | | | |
| | | your pay on line 5, Schedule I, Your Income (Official Form 106) | | \$ | 0.00 |
| | | s you make to support others who do not live with you. | • | \$ | 0.00 |
| Spe | ecify: | | 19. | | |
|). Oth | er real prop | perty expenses not included in lines 4 or 5 of this form or on Sc | hedule I: Y | our Income. | |
| 20a | . Mortgage | s on other property | 20a. | \$ | 0.00 |
| 20b | . Real esta | te taxes | 20b. | | 0.00 |
| 20c | . Property, | homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d | . Maintenar | nce, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e | . Homeowr | ner's association or condominium dues | 20e. | \$ | 0.00 |
| l. Oth | er: Specify: | Tolls | 21. | +\$ | 20.00 |
| Car | r repair/ma | nint/tags | | +\$ | 40.00 |
| 2 Cale | culate vour | monthly expenses | | | |
| | • | through 21. | | \$ | 4,423.00 |
| | | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 |) | \$ | 4,423.00 |
| | | | • | : | 4 400 00 |
| 22C | . Add line 22 | a and 22b. The result is your monthly expenses. | | \$ | 4,423.00 |
| | • | monthly net income. | | | |
| | | 12 (your combined monthly income) from Schedule I. | 23a. | | 5,626.00 |
| 23b | . Copy you | r monthly expenses from line 22c above. | 23b. | -\$ | 4,423.00 |
| 220 | Subtract | your monthly expenses from your monthly income. | | | |
| 23C | | t is your <i>monthly net income</i> . | 23c. | \$ | 1,203.00 |
| | | • | | | |
| | | an increase or decrease in your expenses within the year after ou expect to finish paying for your car loan within the year or do you expect you | | | so or docrosso because of a |
| | | ou expect to finish paying for your car loan within the year or do you expect you terms of your mortgage? | i inoπgage pa | ayınıent to increa | se or decrease decause of a |
| ■ N | | | | | |
| | | Explain here: | | | |
| _ L \ | res. | LAPIGIT HEIE. | | | |

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| Fill in this inforn | nation to identify your | case: | | | |
|---------------------------------------|---|--------------------------|--------------------------------|-----------------------|---|
| Debtor 1 | Michael E Egert | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | Michaela J Egert First Name | Middle Name | Last Name | | |
| , , , , , | nkruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | |
| Case number | | | | | ☐ Check if this is an amended filing |
| Official Form | | n Individual | Dobtor's Sob | odulos | |
| Declarati | ion About a | n marviduai | Debtor's Sch | iedules | 12/15 |
| obtaining money years, or both. 18 | | n connection with a bar | | | ment, concealing property, or), or imprisonment for up to 20 |
| Did you pay | or agree to pay some | one who is NOT an atto | orney to help you fill out ba | nkruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | ame of person | | | | ruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | ty of perjury, I declare true and correct. | that I have read the sur | mmary and schedules filed | with this declaration | n and |
| | nael E Egert | | X /s/ Michaela | | |
| | I E Egert e of Debtor 1 | | Michaela J E Signature of D | | |

Date August 31, 2017

Date August 31, 2017

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| Fill | in this infor | mation to identify you | case: | | | |
|--------------------|--|--|--|--|--|---|
| Del | otor 1 | Michael E Egert First Name | Middle Name | Last Name | | |
| Del | otor 2 | Michaela J Egert | | Last Name | | |
| | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Ba | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Cas | se number | | | | | |
| (if kr | nown) | | | | | Check if this is an amended filing |
| \sim t | Kisial Es | was 407 | | | | |
| | ficial Fo atement | | Affairs for Individ | luals Filing for | Bankruptcy | 4/16 |
| info num | rmation. If n | nore space is needed, n). Answer every ques | attach a separate sheet to tion. | this form. On the top o | are equally responsible for su f any additional pages, write y | |
| Par 1 | | Details About Your Ma | rital Status and Where You | u Lived Before | | |
| ١. | wriat is you | i current mantai statu | 5: | | | |
| | ■ Married□ Not ma | | | | | |
| 2. | During the I | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. Lis | st all of the places you l | ved in the last 3 years. Do r | ot include where you live | now. | |
| | Debtor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior | Address: | Dates Debtor 2 lived there |
| 3. state | | | | | munity property state or territo to Rico, Texas, Washington and | |
| | ■ No | al a composition of Carl | andrila III. Varin Cardahtana (C | W Farma 400) | | |
| | ☐ Yes. Ma | ake sure you fill out Scr | edule H: Your Codebtors (C | ппскаї Form 106H). | | |
| Par | t 2 Expla | in the Sources of You | r Income | | | |
| 4. | Fill in the total | al amount of income yo | nployment or from operating used income that you received from all jobs and have income that you receive | all businesses, including | • | endar years? |
| | □ No | | | | | |
| | Yes. Fil | I in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions an exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year untiled for bankruptcy: | ☐ Wages, commissions, bonuses, tips | \$301.0 | Wages, commissions, bonuses, tips | \$35,462.00 |
| | | | Operating a business | | ☐ Operating a business | |

Official Form 107

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Debtor 1 Michael E Egert
Debtor 2 Michaela J Egert

Case number (if known)

| | Debtor 1 | | Debtor 2 | |
|--|---|--|--|--|
| | | Onese Inese | | Ones ! |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2016) | ■ Wages, commissions, bonuses, tips | \$67,436.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 |
| | ☐ Operating a business | | ☐ Operating a business | |
| | ☐ Wages, commissions, bonuses, tips | \$0.00 | ■ Wages, commissions, bonuses, tips | \$0.00 |
| | Operating a business | | ☐ Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$98,374.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 |
| | ☐ Operating a business | | ☐ Operating a business | |
| | ☐ Wages, commissions, bonuses, tips | \$0.00 | ■ Wages, commissions, bonuses, tips | \$0.00 |
| | Operating a business | | ☐ Operating a business | |
| 5. Did you receive any other incom- Include income regardless of whetl unemployment, and other public be gambling and lottery winnings. If you List each source and the gross income | e during this year or the two her that income is taxable. Ex enefit payments; pensions; rel ou are filing a joint case and y | amples of other income are a ntal income; interest; dividen- ou have income that you rec | alimony; child support; Social ds; money collected from laws eived together, list it only once | suits; royalties; and |
| Include income regardless of wheth unemployment, and other public be gambling and lottery winnings. If you List each source and the gross income. | e during this year or the two her that income is taxable. Ex enefit payments; pensions; rel ou are filing a joint case and y | amples of other income are a ntal income; interest; dividen- ou have income that you rec | alimony; child support; Social ds; money collected from laws eived together, list it only once | suits; royalties; and |
| Include income regardless of wheth unemployment, and other public be gambling and lottery winnings. If you List each source and the gross income. | e during this year or the two her that income is taxable. Ex enefit payments; pensions; re- bu are filing a joint case and y ome from each source separa | amples of other income are a ntal income; interest; dividen- ou have income that you rec | alimony; child support; Social adds; money collected from laws eived together, list it only once that you listed in line 4. | suits; royalties; and |
| Include income regardless of wheth unemployment, and other public be gambling and lottery winnings. If you List each source and the gross income. | e during this year or the two her that income is taxable. Ex enefit payments; pensions; rel ou are filing a joint case and y | amples of other income are a ntal income; interest; dividence ou have income that you recately. Do not include income to Gross income from each source | alimony; child support; Social ds; money collected from laws eived together, list it only once | suits; royalties; and a under Debtor 1. Gross income (before deductions |
| Include income regardless of wheth unemployment, and other public be gambling and lottery winnings. If you List each source and the gross income. | e during this year or the two her that income is taxable. Ex enefit payments; pensions; re- ou are filing a joint case and y ome from each source separa Debtor 1 Sources of income | amples of other income are a ntal income; interest; dividend ou have income that you reco ately. Do not include income to Gross income from | alimony; child support; Social dis; money collected from laws eived together, list it only once that you listed in line 4. Debtor 2 Sources of income | suits; royalties; and e under Debtor 1. Gross income |
| Include income regardless of wheth unemployment, and other public be gambling and lottery winnings. If you List each source and the gross incoming the the gro | e during this year or the two her that income is taxable. Ex- enefit payments; pensions; re- bu are filing a joint case and y ome from each source separa Debtor 1 Sources of income Describe below. | amples of other income are a ntal income; interest; dividence ou have income that you recately. Do not include income of the come of the c | alimony; child support; Social dis; money collected from laws eived together, list it only once that you listed in line 4. Debtor 2 Sources of income | suits; royalties; and a under Debtor 1. Gross income (before deductions |
| Include income regardless of wheth unemployment, and other public be gambling and lottery winnings. If you List each source and the gross income. | e during this year or the two her that income is taxable. Ex- enefit payments; pensions; re- bu are filing a joint case and y ome from each source separa Debtor 1 Sources of income Describe below. | amples of other income are a ntal income; interest; dividence ou have income that you recently. Do not include income that you recently. | alimony; child support; Social dis; money collected from laws eived together, list it only once that you listed in line 4. Debtor 2 Sources of income | suits; royalties; and a under Debtor 1. Gross income (before deductions |
| Include income regardless of wheth unemployment, and other public be gambling and lottery winnings. If you List each source and the gross incomplete in the lottery winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. | e during this year or the two her that income is taxable. Ex enefit payments; pensions; re ou are filing a joint case and y ome from each source separa Debtor 1 Sources of income Describe below. SSI | amples of other income are a ntal income; interest; dividence ou have income that you recently. Do not include income that you recently include income that you have income that you recently income that you have income that you recently income that you have income tha | alimony; child support; Social dis; money collected from laws eived together, list it only once that you listed in line 4. Debtor 2 Sources of income | suits; royalties; and a under Debtor 1. Gross income (before deductions |
| Include income regardless of wheth unemployment, and other public be gambling and lottery winnings. If you list each source and the gross incoming. No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: | e during this year or the two her that income is taxable. Ex enefit payments; pensions; re ou are filing a joint case and y ome from each source separa Debtor 1 Sources of income Describe below. SSI Capital Gain | amples of other income are antal income; interest; dividend ou have income that you recently. Do not include income that you recently include income that you recently include income that you have a supplied in the your property in the your property. The your property is a supplied in the your property in the your property in the your property in the your property. The your property is a supplied in the your property in the your p | alimony; child support; Social dis; money collected from laws eived together, list it only once that you listed in line 4. Debtor 2 Sources of income | suits; royalties; and a under Debtor 1. Gross income (before deductions |
| Include income regardless of wheth unemployment, and other public be gambling and lottery winnings. If you List each source and the gross incomplete in the lottery winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. If you have a source and the gross incomplete in the lotter winnings. | e during this year or the two her that income is taxable. Ex- enefit payments; pensions; re- bu are filing a joint case and y ome from each source separa Debtor 1 Sources of income Describe below. SSI Capital Gain Retirement Dist | amples of other income are antal income; interest; dividend ou have income that you reconstely. Do not include income that you reconstell you have income from each source (before deductions and exclusions) \$9,100.00 \$4,206.00 | alimony; child support; Social dis; money collected from laws eived together, list it only once that you listed in line 4. Debtor 2 Sources of income | suits; royalties; and a under Debtor 1. Gross income (before deductions |

\$5,538.00

Unemployment

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| | otor 1 otor 2 | | chael E Eç chaela J E | | Document | Cas | se number (if know | <i>m</i>) | | | |
|-----|------------------|------------------------------|--|--|---|--|---------------------------------------|--------------------------------------|-----------------------------------|--|--|
| Pai | t 3: | List | Certain Pa | yments You Made Be | fore You Filed for Bankru | ptcy | | | | | |
| 6. | _ | either No. | Neither De | ebtor 1 nor Debtor 2 h | orimarily consumer debts' as primarily consumer de family, or household purpo | ebts. Consumer deb | ts are defined in | 11 U.S.C. § 101 | (8) as "incurred by an | | |
| | | | □ No. □ Yes | Go to line 7. List below each credit paid that creditor. Do not include payments | tor to whom you paid a tota not include payments for d to an attorney for this bank 19 and every 3 years after t | I of \$6,425* or more omestic support obli kruptcy case. | in one or more pations, such as | payments and the child support a | nd alimony. Also, do | | |
| | | Yes. | /es. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | | | |
| | | | ■ No. □ Yes | | tor to whom you paid a tota domestic support obligation ankruptcy case. | | | | | | |
| | Cre | ditor's | s Name and | d Address | Dates of payment | Total amount paid | Amount you still owe | | ayment for | | |
| 7. | corpoinclu supp | ders in oration ding cort an | clude your r ns of which one for a bus d alimony. | elatives; any general pa you are an officer, direc | tcy, did you make a paymartners; relatives of any ger ctor, person in control, or ov a sole proprietor. 11 U.S.C. | neral partners; partners partners of 20% or more | erships of which of their voting s | you are a gener ecurities; and ar | al partner; ny managing agent, | | |
| | Insi | der's | Name and | Address | Dates of payment | Total amount paid | Amount you still owe | | this payment | | |
| 8. | insid | der? de pa No Yes. | yments on o | debts guaranteed or cos | tcy, did you make any pay signed by an insider. Dates of payment | ments or transfer a Total amount paid | Amount you still owe | Reason for | this payment | | |
| Pai | t 4: | lder | ntify Legal A | Actions, Repossessio | ns, and Foreclosures | Para | 2 | | | | |
| 9. | List a | all suc ificatio | h matters, i | ncluding personal injury ntract disputes. | tcy, were you a party in ar y cases, small claims action | | | | | | |
| | | e title e nur | | | Nature of the case | Court or agency | | Status of th | ne case | | |
| 10. | With | in 1 y ck all t | rear before that apply and the line 11 | nd fill in the details belo | tcy, was any of your propo w. | erty repossessed, f | oreclosed, garr | nished, attache | d, seized, or levied? | | |
| | Cre | | Name and | | Describe the Property | | Dat | е | Value of the property | | |
| | | | | | Explain what happened | d | | | property | | |

Case 17-26170 Doc 1 Filed 08/31/17 Entered 08/31/17 10:29:37 Desc Main Document Page 47 of 66 Debtor 1 Michael E Egert Debtor 2 Michaela J Egert Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- - No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost

Part 7: List Certain Payments or Transfers

Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- Nο
- П Yes. Fill in the details.

Person Who Was Paid Address **Email or website address** Person Who Made the Payment, if Not You Description and value of any property transferred

Date payment or transfer was made

Amount of payment Case 17-26170 Doc 1 Filed 08/31/17 Entered 08/31/17 10:29:37 Desc Main Document Page 48 of 66

Debtor 1 Michael E Egert
Debtor 2 Michaela J Egert

Case number (if known)

| 17. | Within 1 year before you filed for bankrupte promised to help you deal with your credite. Do not include any payment or transfer that you have | ors or to ma | ke payment | | | pay or transfer any prope | rty to anyone who | | | |
|-----|--|-----------------------------|---|----------------------------|------------|---|---|--|--|--|
| | Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | | | Date payment or transfer was made | Amount of payment | | | |
| | | | | | | | | | | |
| | Within 2 years before you filed for bankrup transferred in the ordinary course of your landled both outright transfers and transfers minclude gifts and transfers that you have alrea No Yes, Fill in the details. | ousiness or nade as secu | financial aff rity (such as | airs? the granting of a | • | | | | | |
| | | _ | | | | | _ | | | |
| | Person Who Received Transfer Address Person's relationship to you | | ription and erty transfer | | paym | ribe any property or ents received or debts in exchange | Date transfer was made | | | |
| | 1 croom a relationally to you | | | | | | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Name of trust | Desc | ription and | value of the pro | perty tran | sferred | Date Transfer was made | | | |
| Par | 8: List of Certain Financial Accounts, Ir | struments, | Safe Depos | it Boxes, and S | torage Uni | its | | | | |
| | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage | | | | | | | | | |
| | houses, pension funds, cooperatives, asso | | | | | m, shares in banks, ereal | t unions, brokerage | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 dig account n | | Type of accoinstrument | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | year before | you filed fo | r bankruptcy, a | ny safe de | eposit box or other depos | itory for securities, | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | | | the contents | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit | or place oth | er than you | r home within 1 | year befo | ore you filed for bankrupto | cy? | | | |
| | ■ No Yes. Fill in the details. | | | | | | | | | |
| | | \A/I ₂ - | When the beautiful access | | | the contents | De ver still | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | to it? | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe | the contents | Do you still have it? | | | |
| | | | | | | | | | | |

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Debtor 1 Michael E Egert
Debtor 2 Michael J Egert

Debtor 2 Michael J Egert

Case number (# known)

| Part 9: Identify Property You Hold or Cont | rol for Someone Else | | | |
|---|---|-----------------------|-------|--|
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in to for someone. | | | | |
| ■ No □ Yes. Fill in the details. | | | | |
| Owner's Name Address (Number, Street, City, State and ZIP Code | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | |
| Part 10: Give Details About Environmental | Information | | | |
| For the purpose of Part 10, the following defin | nitions apply: | | | |

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

 Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

regulations controlling the cleanup of these substances, wastes, or material.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

■ No
□ Yes. Fill in the details.

Name of site
Address (Number, Street, City, State and ZIP Code)

Governmental unit
Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Environmental law, if you know it

No

■ No

Name of site
Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Code)

Date of notice know it

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

zo. Have you been a party in any judicial or administrative proceeding under any environmental law? include settlements and orders.

■ No
□ Yes. Fill in the details.

Case Title Court or agency Nature of the case Status of the Case Number Name Address (Number, Street, City, State and ZIP Code)

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

Yes. Fill in the details.

Case 17-26170 Doc 1 Filed 08/31/17 Entered 08/31/17 10:29:37 Desc Main Page 50 of 66 Document Michael E Egert Debtor 1 Debtor 2 Michaela J Egert Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Michael E Egert /s/ Michaela J Egert Michael E Egert Michaela J Egert Signature of Debtor 1 Signature of Debtor 2 Date August 31, 2017 Date August 31, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: August 31, 2017 | · · · · · · · · · · · · · · · · · · · |
|-----------------------|---------------------------------------|
| Signed: | |
| /s/ Michael E Egert | /s/ David Cutler |
| Michael E Egert | David Cutler |
| | Attorney for the Debtor(s) |
| /s/ Michaela J Egert | • |
| Michaela J Egert | |
| Debtor(s) | |
| • | |

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In | re | Michael E Egert Michaela J Egert | | | Case N | lo. | |
|-----|----------------|---|---|--|--|---------------------|------------------------|
| | - | Michaela o Egert | • | Debtor(s) | Chapte | | |
| | | DISCI | LOSURE OF COM | PENSATION OF ATT | ORNEY FOR | DEBTOR(S |) |
| 1. | con | npensation paid to me | e within one year before the | 2016(b), I certify that I am the at a filing of the petition in bankrup attion of or in connection with the | tcy, or agreed to be p | oaid to me, for ser | |
| | | For legal services, I | I have agreed to accept | | \$ | 4,000.0 | 0_ |
| | | Prior to the filing of | of this statement I have recei | ived | \$ | 0.0 | 0 |
| | | Balance Due | | | \$ | 4,000.0 | <u>0</u> |
| 2. | \$ | 0.00 of the filing | fee has been paid. | | | | |
| 3. | The | e source of the compe | ensation paid to me was: | | | | |
| | | ■ Debtor □ | Other (specify): | | | | |
| 4. | The | e source of compensa | ation to be paid to me is: | | | | |
| | | ■ Debtor □ | Other (specify): | | | | |
| 5. | • | I have not agreed to | share the above-disclosed | compensation with any other per | son unless they are n | nembers and asso | ciates of my law firm. |
| | | | | pensation with a person or person en names of the people sharing in | | | of my law firm. A |
| 5. | In | return for the above-o | disclosed fee, I have agreed | to render legal service for all as | pects of the bankrupt | cy case, including | j: |
| | b. c. d. | Preparation and filing Representation of the | g of any petition, schedules e debtor at the meeting of co e debtor in adversary proces | rendering advice to the debtor in s, statement of affairs and plan where ditors and confirmation hearing edings and other contested bankr | hich may be required g, and any adjourned | ; | |
| 7. | Ву | agreement with the d | lebtor(s), the above-disclose | ed fee does not include the follow | wing service: | | |
| | | | | CERTIFICATION | | | |
| thi | | ertify that the foregoin kruptcy proceeding. | ng is a complete statement of | of any agreement or arrangement | for payment to me for | or representation | of the debtor(s) in |
| | Aua | just 31, 2017 | | /s/ David Cutle | er | | |
| | Date | | | David Cutler | | | |
| | | | | Signature of Atto Cutler & Asso | | | |
| | | | | 4131 Main Str | eet | | |
| | | | | Skokie, IL 600 | 76 Fax: 847-673-863 | .6 | |
| | | | | david@cutlerl | | | |
| | | | | Name of law firm | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Michael E Egert Michaela J Egert | | Case No. | |
|-------|--|---|----------------|---------------------------|
| | | Debtor(s) | Chapter | 13 |
| | VER | IFICATION OF CREDITOR MA Number of C | | 31 |
| | The above-named Debtor(s) h (our) knowledge. | ereby verifies that the list of creditor | rs is true and | correct to the best of my |
| Date: | August 31, 2017 | /s/ Michael E Egert Michael E Egert Signature of Debtor | | |
| Date: | August 31, 2017 | /s/ Michaela J Egert Michaela J Egert | | |
| | | Signature of Debtor | | |

ACS/Bank of America/Education Services Attn: Claims Department Po Box 9400 Wilkes-Barre, PA 18773

Atlantic Crd P O Box 13386 Roanoke, VA 24033

Bank of America Attn: Recovery Department 4161 Piedmont Pkwy Greensboro, NC 27410

Cap1/carsn Po Box 30253 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: General Correspondence PO Box 30285 Salt Lake City, UT 84130-0285

Chase Card Services Attn:Bankruptcy Dept Po Box 15298 Wilmington, DE 19850

Citi Student Loans Attn: Legal PO Box 6191 Sioux Falls, SD 57117-6191

Citibank Citicorp Credt Srvs/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179 Citizens Bank Attn: Bankruptcy Dept 443 Jefferson Blvd Ms Rjw-135 Warwick, RI 02886

Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218

Dept Of Education/neln 121 S 13th St Lincoln, NE 68508

Dpt Ed/slm
Po Box 9635
Wilkes Barre, PA 18773

Edsouth W/jp Morgan Attn: Bankruptcy Dept. Po Box 36014 Knoxville, TN 37930

Feb/frys 11781 S. Lone Peak Pkwy #135 Draper, UT 84020

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Michael M Egert 22W732 Hackberry Dr Glen Ellyn, IL 60137

National City Mortgage/PNC Mtg Attn: Bankruptcy Department 3232 Newmark Dr. Miamisburg, OH 45342 Pnc Bank 6750 Miller Road Brecksville, OH 44141

Pnc Bank Attn: Bankruptcy 2730 Liberty Ave Pittsburgh, PA 15222

PNC Bank Mortgage 3232 Newark Dr Miamisburg, OH 45342

Pnc Bank Na Po Box 3180 Pittsburgh, PA 15222

PNC Mortgage 6 N Main Street Dayton, OH 45402

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Sallie Mae Attn: Claims Department Po Box 9500 Wilkes-Barre, PA 18773

Synchrony Bank/HH Gregg Attention: Bankruptcy Po Box 103106 Roswell, GA 30076

Synchrony Bank/Mens Wearhouse Attn: bankruptcy Po Box 103104 Roswell, GA 30076

U S Dept Of Ed/fisl/at Attn: Bankruptcy 61 Forsythe St Room 19t89 Atlanta, GA 30303

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Unvl/citi
Attn.: Centralized Bankruptcy
Po Box 20507
Kansas City, MO 64195

Us Bk Rms Cc Po Box 108 St Louis, MO 63166